

N.J.A.C. 10:37D MANAGEMENT AND GOVERNING BODY STANDARDS

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N.J.A.C. 10:37D
MANAGEMENT AND GOVERNING BODY STANDARDS

EFFECTIVE DATE November 16, 2004.
EXPIRATION DATE November 16, 2009.

SUBCHAPTER 1. GENERAL PROVISIONS

10:37D-1.1 Scope and purpose

(a) These rules shall apply to all provider agencies (PA) funded by the Division of Mental Health and Hospitals (Division). In the event any of these rules may conflict with the rules of another division of the Department, the rules of the cognizant Division, as determined in accordance with N.J.A.C. 10:3-4, shall apply.

(b) These rules are designed to promote client centered services which provide high quality, accessible and innovative treatment. These rules are also designed to promote creativity and responsiveness to client and staff needs, and goal directed services.

10:37D-1.2 Definitions

The words and terms in this chapter shall have the following meanings, unless the context clearly indicates otherwise:

"Department" means the Department of Human Services.

"Division" means the Division of Mental Health and Hospitals.

"Provider agency (PA)" means an agency contracted with, or funded by, the Division to provide specific direct mental health services to clients.

SUBCHAPTER 2. MANAGEMENT STANDARDS

10:37D-2.1 Table of organization

(a) Each PA shall have a written table of organization.

1. The table of organization shall clearly delineate staff accountability and the chain of command of the PA.

2. The table of organization shall be revised within 90 days of any major change in the agency organizational structure.

3. The table of organization shall be approved by the governing board.

10:37D-2.2 Policies and procedures

(a) Each PA shall develop policies and procedures to adequately guide PA operations to meet organizational, fiscal, programmatic and management objectives.

1. Each PA shall ensure that agency policies and procedures are written, distributed to staff and clients, when relevant, and consistently enforced and monitored.

2. Clients shall be provided the opportunity to recommend and evaluate PA policies and procedures that impact the services they receive.

3. Each PA shall review all policies and procedures annually, and revise as necessary. The annual reviews shall be documented.

10:37D-2.3 Service accessibility

(a) Each PA shall make services accessible to clients.

1. Mental health services shall be available at times and locations which provide all clients access to the services.

2. All services shall be accessible to physically handicapped individuals.

3. Through careful attention to ethnic, racial, primary language, and other characteristics, the PA shall assure that services provided to clients are culturally sensitive, culturally competent and in a language sufficiently well understood by the client to assure comprehension.

4. Each PA shall provide a written sliding fee scale for clients based on their ability to pay, and inability to pay for services shall not preclude the receipt of services.

10:37D-2.4 Staff communications

(a) There shall be documentation that managers provide staff with the information they need to effectively perform the functions of their assigned tasks.

1. Methods for communicating information may include staff meetings, written memoranda and supervisory meetings. Documentation that such communication exists may include evidence of staff and supervisory meetings and informational memoranda.

10:37D-2.5 Environment

(a) Each PA shall maintain a clean and safe environment which promote dignity and self respect for staff and clients.

1. The physical plant shall be regularly cleaned and inspected for possible life safety deficiencies.

2. There shall be sufficient space allocated for the programs and activities provided.

3. There shall be sufficient space to allow for privacy for individual, group or family sessions.

10:37D-2.6 Quality assurance

(a) Managers in each PA shall participate in and support their quality assurance program.

1. There shall be documented evidence that information resulting from the quality assurance process is reviewed and used by management to promote and enhance the mission, goals and objectives of the organization.

2. There shall be evidence that management provides input into the agency's quality assurance process as required at N.J.A.C. 10:37-9.

10:37D-2.7 Management information system

(a) Each PA shall develop a computerized or manual management information system which provides information to support the goals and objectives of the organization and the provision of high quality client-centered services.

1. The management information system may include, but need not be limited to, data on admissions, diagnoses, wait for service, referral sources, discharges, dropouts, readmissions, incidents, direct service staff activities, staff caseloads, frequency of services, and types of service modalities.

2. The information collected shall be used by management to assess accessibility of services and appropriateness of staffing, and to assist in management decision-making.

3. The PA's management information system shall be able to generate all routine system-wide contract and client registry data required by the Division.

4. Client information that is contained in the management information system shall be safeguarded to protect confidentiality.

10:37D-2.8 Coordination of services

(a) Each PA shall develop methods to coordinate services between providers who serve mutual clients to ensure continuity of care.

1. Procedures to coordinate services shall ensure that clients' treatment goals and objectives are consistently reinforced and that the services provided are complementary.

10:37D-2.9 Financial procedures

(a) Each PA shall have a system of financial internal controls to protect organizational assets and promote the goals and objectives of the organization.

(b) The system of financial internal controls shall provide reasonable assurance that:

1. Obligations and costs are in compliance with applicable laws;

2. Funds, property and other assets are safeguarded against waste, loss, unauthorized use and misappropriation;

3. All financial transactions applicable to agency operations are properly recorded and accounted for so that financial and statistical reports and accountability over the assets can be maintained and can be prepared; and

4. There is a system of checks and balances related to specific financial routine procedures and a careful separation of functions and responsibilities in authorizing, processing, recording and reviewing transactions.

(c) Each PA's financial procedures shall include, but need not be limited to, the following:

1. Well-maintained accounting records in accordance with generally accepted accounting principles; such records shall include, but not necessarily be limited to, general ledger, cash receipts and cash disbursement journals, accounts receivable and accounts payable journals, payroll register, and inventory records;

2. Up-to-date records related to client attendance and determination of client fees;

3. A methodology for monitoring the accuracy of budget projections compared to actual costs, at least on a quarterly basis; and

4. The reports to the governing board of current financial status information, at least on a quarterly basis.

(d) Each PA's written policies and procedures shall adhere to the contract accounting and reporting requirements contained in N.J.A.C. 10:3.

10:37D-2.10 Personnel manual

(a) Each PA shall have a personnel policies and procedures manual which is approved by the governing board and describes the practices of the PA.

(b) There shall be documentation that the governing board has approved the personnel manual and all subsequent revisions.

(c) The personnel manual shall include, but need not be limited to, the following policies: staff benefits, work hours, sick leaves, leave of absence, on the job injuries, grievances, employee discipline, code of ethics, outside employment, reporting losses, thefts or vandalisms, retirement assistance, employee evaluations, and conflict of interest.

(d) There shall be written job descriptions for every employee position which includes staff responsibilities, minimum qualifications and reporting

relationships.

10:37D-2.11 Personnel files

(a) Each PA shall maintain personnel files for all staff and volunteers.

1. Personnel files shall include applications and resumes with pertinent identifying data; a copy of employee contracts when applicable; copies and verifications of professional credentials as appropriate; performance evaluations; and current job descriptions.

10:37D-2.12 Verification of staff credentials

(a) Each PA shall have written policies and procedures to ensure the verification of staff credentials and employment references.

1. Credentials shall be verified either: by viewing the original licenses or degrees of professional staff; a sign-off sheet by the personnel officer or appropriate staff; or documentation of written or telephone contact with the organization that granted the degree; or license.

2. Previous employment shall be verified by documentation of written or telephone contact with an employee's previous employers.

3. There shall be documentation that licenses are verified each year to ensure that they are valid.

10:37D-2.13 Qualification of clinical staff

(a) Each PA shall hire clinical staff who are appropriately licensed, certified or trained in order to be able to assume responsibility for the clinical services provided by the PA.

1. The PA governing board shall formally adopt policies and procedures to ensure that psychiatrists are Board certified or Board eligible by the American Board of Psychiatry or the American Osteopathic Board of Neurology and Psychiatry.

2. The PA shall ensure that only appropriately licensed personnel shall provide services for which a license is required.

10:37D-2.14 Training

(a) Each PA shall orient, train, supervise and evaluate employees.

1. There shall be an orientation to assist staff to adequately perform their job responsibilities at the onset of their employment.

2. There shall be documented ongoing training provided to staff on pertinent topics.

3. Cultural sensitivity shall be included in staff orientation and training programs.

4. There shall be regularly scheduled staff meetings or supervisory conferences.

5. There shall be at least an annual performance evaluation of all staff.

6. There shall be procedures to supervise the work of student interns and volunteers.

10:37D-2.15 Conflict of interest

(a) Each PA shall have a policy addressing conflict of interest issues.

1. The policy shall prohibit PA staff from personal, financial, professional or political gain at the expense of the PA's or clients' interest.

2. The policy shall comply with any current Department conflict of interest rules contained in N.J.A.C. 10:3-1.14.

10:37D-2.16 Non-discrimination

(a) Each PA shall have a policy that prohibits discrimination against applicants for employment or services and against any employee or recipient of service, because of race, color, creed, religion, ethnic background, national origin, marital status, handicap, age or gender. The policy shall comply with all Federal and State statutes as well as any current Department non-discrimination policy.

10:37D-2.17 Affirmative action and equal employment opportunity

Each PA shall have policies and procedures that address Affirmative Action pursuant to the Civil Rights Act of 1964, Executive Order No. 61, N.J.A.C. 17:27, N.J.S.A. 10:5-31 et seq. and P.L. 1975, c.127, and Equal Employment Opportunity pursuant to N.J.S.A. 11A:7-1 et seq. The policies shall adhere to all Federal and State statutes and any current Department policies.

10:37D-2.18 Client confidentiality, rights and grievances

(a) Each PA shall have policies and procedures to address client confidentiality, rights and grievances.

1. The policy to safeguard clients' confidentiality shall comply with N.J.S.A. 30:4-24.3 on confidentiality, any current Department policies on access to records and N.J.A.C. 10:37-6.79, Confidentiality of records.

2. The policy to address clients' rights shall comply with N.J.A.C. 10:37-4.5, Clients rights.

3. The clients' grievance procedure shall comply with N.J.A.C. 10:37-4.6, Client complaint agency ombuds procedure.

4. Policies on client confidentiality, rights and grievances shall comply with all related Federal and State statutes, and any current Department rules.

SUBCHAPTER 3. GOVERNING BODY STANDARDS

10:37D-3.1 Governing board; general duties and composition

(a) Each PA shall have a governing board which may establish advisory boards or committees to ensure that the PA's programs are responsive to the consumers in the communities served by the PA.

1. Priority for membership shall be given to individuals who reside, work, and/or receive services in the service area, or are former recipients of services, or have family member(s) who receive services from the PA.

2. Each PA shall document "good faith" efforts to recruit current or former recipients of services from a mental health program, or family members or guardians of such recipients for board membership.

3. Governing boards and advisory boards shall generally reflect the age, race and gender demographics of the service area.

4. To promote diversity, advisory boards shall be composed of individuals with varied expertise.

5. The majority of the governing and advisory board members shall not be providers of health care.

6. There shall be documentation that all advisory boards offer recommendations to the governing board for their consideration.

10:37D-3.2 Governing board; financial responsibility

(a) Each PA's governing board shall assume fiduciary responsibility for the financial management of the PA.

1. The governing board shall authorize, approve and adopt the PA's annual budget.

2. The governing board shall approve all capital projects.

3. The governing board shall review and approve the PA's annual audits performed by an independent public accountant.

4. Each governing board shall formally designate a member to certify financial statements by signature.

5. The governing board shall monitor expenditure reports on at least a quarterly basis to ensure the PA's financial solvency.

10:37D-3.3 By-laws

(a) Each governing board shall establish by-laws that define its roles and functions.

1. The by-laws shall describe the powers and duties of the governing board, its officers and committees.

2. The by-laws shall state the criteria and method of selecting members.

3. The by-laws shall state the number of members necessary for a quorum and the rules for meetings, including frequency of meetings.

4. The by-laws shall describe the authority and responsibilities of the Chief Executive Officer including his or her reporting responsibilities to the board.

5. The by-laws shall be reviewed at least every two years and revised as necessary. The board president or chair shall sign and date the by-laws to indicate the time of review or revision.

6. The by-laws shall conform to the requirements of N.J.S.A. 15A:2-10.

10:37D-3.4 Conflict of interest

Each governing board shall develop a conflict of interest and disclosure policy which conforms with Department rules at N.J.A.C. 10:3-1.14.

10:37D-3.5 Meetings; schedule and minutes

(a) Each governing board and its advisory boards shall meet on a regular basis as described in its by-laws.

1. The governing board and its advisory boards shall meet with sufficient frequency to carry out the functions described in this document but in no case less frequently than quarterly.

2. Minutes of meetings shall be maintained, including resolutions and motions pertaining to the fiscal and legal responsibilities of the board.

10:37D-3.6 Functions of the board

(a) The executive and management functions of the governing board shall include, at a minimum, establishing and approving general policies for the fiscal and programmatic operation of the agency, to ensure consistency with the agency's mission and goals.

(b) The governing board shall appoint the Chief Executive Officer and evaluate his or her performance biannually.

(c) The governing board shall review and approve plans to establish new programs or to substantially alter or discontinue existing programs, substantial changes in levels of service, and changes in populations served.

10:37D-3.7 Reports to the board

(a) Each PA shall submit written reports summarizing the PA's activities and status to the governing board.

1. The governing board shall determine the nature and frequency of these reports, with input from the Chief Executive Officer.

2. The frequency and content of these reports shall provide the governing board sufficient information to meet its legal and fiscal responsibilities.

3. The PA shall provide summaries of Quality Assurance findings to the governing board.

10:37D-3.8 Department access to records

Each governing board shall conform to any current Department rules regarding access to PA records.